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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

*I.A.*  
*None*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*I.A.*  
*None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

02/18/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WA	SHEETS DRAWING 7	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>I.A.</i>				

## ADDRESS

08933

## TITLE

Wafer stage position calibration method and system

<b>FILING FEE RECEIVED</b> 1314	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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